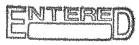
Type of Inspection				
New 🗆]			
Annual 🖠				
Follow-U	p			
(Prev. Ins	pection Date)			
Complain	t 🗆			
Courtesy				
Random				

NCDA&CS, VETERINARY DIVISION ANIMAL WELFARE SECTION 1030 MAIL SERVICE CENTER, **RALEIGH, NC 27699-1030**

PHONE: 919/715-7111, FAX: 919/733-6431





GPS Coordin	nates - N: 35	59155	w: 78.	57159
ADDRESS: 339 Shi TELEPHONE: (119) 3° VMO Hunter COUNTY WAKE	Bone Voyage Spear ipwash Dr G 29-9892	BANNER NC B	27579	
Number of Primary Enclos	sures 44	Animals Present:	Dogs 36	Cats
	Circle	x "X" in each box, e each item numbe NA if not applicable	r, if inadequate.	
STRUCTURE	SA	NITATION	SP	PECIAL ITEMS
Housing Facilities 1. Structure & Repair 2. Ventilation & Temp. 3. Lighting 4. Ceiling, Wall, Floors 5. Storage 6. Water Drainage	成 1 成 1 以 1 <u>人</u> 1	 Waste Disposal Odor Ceiling, Wall, Flo Primary Enclosur Equipment & Sup Washrooms, Sink Insect/Vermin Co Building & Ground 	poors A2 poplies M2 as, Basins M2 ontrol	ecords 24. Description of Animals 25. Records/Vet Treatment 26. Origin/Disposition 27. Signature (boarding kennel) 28. Written permission from owner for commingling (doggie daycare)
Primary Enclosures 7. Structure & Repair 8. Space 9. Ventilation & Temp. 10. Adequate Shelter	× 1	22. Ratio of 1:10 pers animals if >4 in enclosure or con	sonnel to Ve primary mon area	eterinary Care 30. Isolation Facility 31. No Signs of Illness/ Treated
APPROVED CO	ONDITIONALLY AP	PROVED 🗆 DISA	pproved Kati	Date: The fat Time: 10:10nm
AW-2 ('s Signature	Canary= Inspector		thorized Agent's Signature

PAGE _/ OF _/_